Saratoga-Warren-Washington Workforce Investment Board and Emerging Workers Council

REQUEST FOR PROPOSAL APPLICATION

Workforce Investment Act Program Year 2014 Title I-B Youth Services

PROPOSALS DUE May 28, 2014 at 4:00PM to Saratoga County Department of Employment and Training 152 West High Street Ballston Spa, New York 12020

Issued: May 2, 2014

Questions regarding the RFP should be directed by email or fax to:

Lisa Scaccia, Director
Saratoga County Department of Employment and Training
152 West High Street
Ballston Spa, New York 12020
All questions must be received by 12:00 pm on May 23rd
All Questions will be answered by 12 pm
Fax: 518-884-4262

Email: Iscaccia@saratogacountyny.gov

CHECKLIST FOR REQUIRED FORMS

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SARATOGA-WARREN-WASHINGTON WORKFORCE INVESTMENT AREA Summary of Request for Proposal (RFP) Application

Name of Applicant Organization:		
Address		
Phone	Fax	_
Contact Person		
Phone	Email	
Type of Organization: (check one)	☐ For Profit	☐ Non-Profit
	Incorporated in the State	of:
	☐ Governmental Entity	☐ Educational Institution
Names and Affiliations of Proposal Colla	borators:	
Name 9 Type of Dragge		
Name & Type of Program		
Primary Areas of Service		
Project Period From:	to	
WIA Amount Requested For This Project	t	
Total Other Resources (if dollar amount)	For This Project	
Does your organization have the capabil	ity to repay a disallowed audit co	ost? YES NO
Executive Director/ Signatory Authority:	Title:	Date:
Signature:		
	Daga 4	

PLANNED PERFORMANCE:

Total Number of WIA Youth to be served:				
#1 Priority	Out of School Youth			
#2 Priority	High School Seniors:			
#3 Priority	High School Juniors:			

In the chart below insert the number of youth who will meet each performance measure listed:

Number of Youth	Performance Measure	At-A-Glance
2 0 0.022		(see RFP for details)
	Placement in Employment/Education	Participants' placement into unsubsidized employment or post secondary education and/or advanced training/occupational skills training or the military.
	Attainment of Degree or Industry Recognized Certificate	Attainment of a diploma/TASC, or industry-recognized occupational certificate. All bidders must specify type of certificate that the youth will attain.
	Literacy and Numeracy Gains	Of the participants who are basic skills deficient (reading and/or math level below 8 th grade), an increase of at least one or more educational functioning levels (EFL's) on the TABE test. Testing must be done within 60 days of WIA enrollment, at least annually during participation and before exit.

PROGRAM DESIGN & DESCRIPTION

Describe your planned program design. Design must address the EWC identified "Key Tenets" and provide the "Program Elements" listed in section II. Please include a description of how you will achieve your planned performance goals from Pg 5.

DEMONSTRATED ABILITY

Briefly discuss/describe your experience to demonstrate your ability to carry out a successful youth program that can meet all requirements listed in this RFP.

Cost Reimbursement Contracting BUDGET SUMMARY

Please attach a budget narrative to support each item of costs listed.

COST CATEGORY	WIA FUNDS	IN-KIND/OTHER FUNDS	TOTAL
Personnel			
Operating Expenses			
Participant Expenses			
Subcontracted Services			
Administration*			
Other			
Total			
Cost per participant			
Projected Out of School Youth Expenditures**			
Other leveraged funds:			
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Personnel: include job title, rate of pay, fringe benefit rate, estimated time charged to project Operating Expense: Staff travel, office supplies, phone and copying Participant Expenses: Tuition, books, supplies, fees, work experience wages/fringe, support services Subcontracted Services: Detail by subcontractor/partner agency *Administration: Limited to no more than 10%

^{**}Must be at least 70% of WIA expenditures.

BUDGET NARRATIVE

Fully explain each line item request.

LEVERAGED FUNDS / RESOURCES

Clearly explain any in-kind or leveraged resources here.

CERTIFICATION

This is to certify that the undersigned applicant has the authority to sign this Request for Proposal on behalf of the agency. Further, the applicant certifies that should a contract be awarded, they will:

- *Comply with the provisions of this Request for Proposal, the Workforce Investment Act of 1998, WIA Federal regulations and all other applicable state and local policies.
- *Agree to repay any disallowed costs that may be identified through an audit or monitoring review with non-federal funds.
- *Name Saratoga County as additional insured on their liability insurance.
- *Grant access to their facilities and relevant financial and program records by state, federal and/or local monitors/auditors.

Signature:		
Title:		
Dete		
Date:		